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APPLICANTS

Mary E. Brunkow, Seattle, WA;
 David J. Galas, Claremont, CA;
 Brian Kovacevich, Renton, WA;
 John T. Mulligan, Seattle, WA;
 Bryan W. Paeper, Seattle, WA;
 Jeffrey Van Ness, Seattle, WA;
 David G. Winkler, Seattle, WA;

**** CONTINUING DATA *******

This application is a DIV of 09/449,218 11/24/1999 PAT 6,395,511
 which claims benefit of 60/110,283 11/27/1998

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 6	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

STEPHEN J. ROSENMAN, Ph.D.
 Seed Intellectual Property Law Group PLLC
 Suite 6300
 701 Fifth Avenue
 Seattle, WA 98104-7092

TITLE

ANTIBODIES ASSOCIATED WITH ALTERATIONS IN BONE DENSITY

FILING FEE RECEIVED 1288	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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